## **Application Data Sheet**

## **Application Information**

Application number:: To Be Assigned

Filing Date:: 12/03/04

Application Type:: Regular

Subject Matter:: Utility

Title:: ANTI-CD30 STALK AND ANTI-CD30

ANTIBODIES SUITABLE FOR USE IN

**IMMUNOTOXINS** 

Attorney Docket Number:: 015280-464200US

Request for Early Publication:: No

Request for Non-Publication:: No

Total Drawing Sheets:: 9

Small Entity?:: No

Petition included?:: No

Secrecy Order in Parent Appl.:: No

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: <u>Ira</u>

Middle Name::

Family Name:: PASTAN

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State or Province of Residence:: MD

Country of Residence:: US

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City of Mailing Address:: Potomac

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 20854

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Satoshi

Family Name:: NAGATA

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State or Province of Residence:: MD

Country of Residence:: US

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City of Mailing Address:: Rockville

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 20852

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Masanori

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State or Province of Residence:: MD

Country of Residence:: US

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City of Mailing Address:: Rockville

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Country of mailing address:: US

Postal or Zip Code of mailing address:: 20852

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Yoshito

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Country of Residence:: Japan

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City of Mailing Address:: Osaka

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Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Kenneth

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State or Province of Residence:: MD

Country of Residence:: US

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Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Richard

Family Name:: BEERS

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State or Province of Residence:: MD

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Postal or Zip Code of mailing address:: 20853

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Robert

Family Name:: KREITMAN

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State or Province of mailing address:: MD

Country of mailing address:: US

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Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: -Abhishek

Family Name:: SINHA

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State or Province of Residence:: CA

Country of Residence:: US

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Country of mailing address:: US

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**Correspondence Information** 

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

**Domestic Priority Information** 

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This Application National Stage of PCT/US2003/018373 June 9, 2003

Claims Benefit of 60/387,293 June 7, 2002

60/411,032 September 16, 2002

## **Assignee Information**

Assignee Name:: THE GOVERNMENT OF THE UNITED STATES,

AS REPRESENTED BY THE SECRETARY OF THE DEPARTMENT OF HEALTH AND HUMAN

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